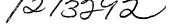
FORM D

U. S. SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

NOTICE OF SALE OF SECURITIES





PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY									
Prefix	Serial								
l									
DATE	RECEIVED								
ll									

Name of Offering (check if this is an amendment and name has changed, and Indicate change.) Sale of limited liability company membership interests.
Filing Under (Check box(es) that apply): X Rule 504 X Rule 505 X Rule 506 Section 4(6) ULOE
Type of Filing: X New Filing Amendment
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer (_ check if this is an amendment and name has changed, and indicate change.) BPI Acquisition, LLC
Address of Executive Offices (Number and Street, City, State, Zip Code) 3370 Port Union Road, Fairfield, Ohio 45014 [Telephone Number (Including Area Code) (513) 860-3593
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Telephone Number (Including Area Code)
Brief Description of Business Issuer is in the concrete casting business. PROCE
Time of Puringes Organization
Corporation I limited partnership, already formed
Business trust limited partnership, to be formed
Month Year FINAN
Actual or Estimated Date of Incorporation or Organization: 11 03 X Actual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)
GENERAL INSTRUCTIONS
Federal:
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230 et seq. or 15 U.S.C. 77d(6).
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not man signed must be photocopies of the manually signed copy or bear typed or printed signatures.
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and oing, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in FA and B. Part E and the Appendix need not be filed with the SEC.
Filing Fee: There is no federal filing fee.
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those so that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administ in each state where sales are to be, or have been, made. If a state requires the payment of a fee as a precondition to the claim for the exition, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of available state exemption unless such

exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - · Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner of partnership issuers.

Check Box(es) that Apply: Promoter	X Beneficial Owner	X Executive Officer	Director	General and/or
Full Name (Last name first, if individual)		F - 144 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		Managing Partner
Kelly, Robert J.				
Business or Residence Address (Number and Street, City 3370 Port Union road, Fairfield, Ohio 45014	r, State, Zip Code)			
	V	5	D: 1	O a series adden
Check Box(es) that Apply: Promoter	X Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Everingham, Mark P.				
Business or Residence Address (Number and Stre	eet, City, State, Zip Code)			· · · · · · · · · · · · · · · · · · ·
3370 Port Union Road, Fairfield, Ohio 45014				
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Individual)				Managing Famile
Business or Residence Address (Number and Str	eet, City, State, Zip Code)			<u> </u>
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director _	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number and Str	eet, City, State, Zip Code)			
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number and Str	eet, City, State, Zip Code)			
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		· · · · · · · · · · · · · · · · · · ·		
Business or Residence Address (Number and Str.	eet, City, State, Zip Code)		······································	
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number and Street, City	y, State, Zip Code)			
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				іманаўніў Еалиюі
Business or Residence Address (Number and Str	eet, City, State, Zip Code)			
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				манауну панны
Business or Residence Address (Number and Street, City	y, State, Zip Code)			
		** 		

				В.	INFOR	NOITAN	ABOUT (OFFERIN	IG				
												Yes	No
1.	Has the iss	uer sold, or d	oes the issue	er intend to s	ell, to non-ac	credited inve	stors in this	offering?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			<u>X</u>
				Ans	swer also in A	Appendix, Co	dumn 2. if fili	ng under ULC	DE.				
						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	•					
2.	What is the	minimum In	vestment tha	will be acce	pted from an	y individual?						\$	50,000
												Yes	No
3.	Does the or	fering permit	joint owners	hip of a singl	e unit?						.,		<u>_X</u> _
4.	remuneration or agent of persons to	on for solicita a broker or o be listed are	tion of purch lealer registe associated p	asers in con- red with the ersons of su	nection with s SEC and/or ch a broker o	sales of secu with a state or dealer, you	rities in the co or states, list may set fort	ffering if a	person to be the broker of tion for that t	listed is an a or dealer. If r proker or dea		on	
ruii Name (La	st name first, if i	noividuai)											
None	·												
Business or R	esidence Addre	ss (Number an	d Street, City,	State, Zip Cod	e)								
WA													
Name of Asso	clated Broker or	· Dealer											
N/A	ch Person Lister	ttes Callette	1-1	atial Daniel					···				·
	ck "All States"											A	ll States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	(CT)	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]	
[RI]	[SC]	[SD]	[TN]	[XT]	[UT]	[VT]	[AV]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name (Le	st name first, if	ndividual)							- P. op. , or open and the des pera			** ,	
None													
Business or R	esidence Addre	ss (Number an	d Street, City,	State, Zip Cod	6)								
N/A													_
Name of Asso	clated Broker of	Dealer											
N/A	·												
	ch Person Lister ck "All States							•••••				A	II States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
(IL) (MT)	[iN] [NE]	[IA] [NV]	[KS] [NH]	[NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]	
[RI]	[sc]	(spj	[NT]	įχή	[บт]	įvrj	[VA]	[WA]	[WV]	[WI]	įWY	[PR]	
Full Name (La	est name first, if	individual)							·				·····
None													
	tesidence Addre	ss (Number an	d Street, City,	State, Zip Cod	(e)				···				
N/A													
	ciated Broker o	Dealer	······································										····
N/A													
States in Whi	ch Person Lister											Α	Il States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	ĮCΤ	(DE)	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL] [MT]	[IN]	[IA] [NV]	[KS] {NH}	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[OM]	
[RI]	[NE] [SC]	[SD]	[TN]	[LN] [XT]	[MM] [UT]	[VY] [VT]	[NC] [VA]	[ND] [WA]	[WV]	(OK) [WI]	[OR] [WY]	(PA) [PR]	

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Offering Price Sold Type of Security 0 Debt 0 _0 Equity..... ___ Common ___ Preferred Convertible Securities (including warrants) 0 Partnership Interests \$ 400,000 \$ 400,000 Other (Specify: Limited Liability Company Membership Interests)..... \$ 400,000 \$ 400,000 Total Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their Aggregate Dollar Amount of Purchases Number Investors purchases on the total lines. Enter "0" if answer is "none" or "zero." \$ 400,000 5 Accredited Investors 0 Non-accredited Investors..... 5 \$ 400,000 Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types Indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Dollar Amount Type of Sold Type of offering Security N/A Rule 505 Regulation A..... Rule 504 NA N/A Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs _ \$____ X \$ 6,000 Legal Fees Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately) Other Expenses (identify) \$___

Total

X \$ 6,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	b. Enter the difference between the aggregate offer Question 1 and total expenses furnished in response is the "adjusted gross proceeds to the issuer."	to Part C - Question 4.a. This difference		\$ <u>394,000</u>
5.	Indicate below the amount of the adjusted gross proused for each of the purposes shown. If the amount estimate and check the box to the left of the estimate the adjusted gross proceeds to the issuer set forth in	unt for any purpose is not known, furnish and. The total of the payments listed must equal.	I	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	·····	\$	\$
	Purchases of real estate		<u> </u>	\$
	Purchase, rental or leasing and installation of ma	achinery and equipment	\$	\$
	Construction or leasing of plant buildings and fac	cilities	\$	\$
	Acquisition of other businesses (including the vo			
	issuer pursuant to a merger)		\$	<u> </u>
	Repayment of indebtedness		\$	X \$ 195,000
	Working capital		\$	X \$ 199,000
	Other (specify):		\$	\$
			\$ \$	\$
	Column Totals		\$	X \$ 394,000
	Total Payments Listed (column totals added)		_X_	\$394,000
		D. FEDERAL SIGNATURE		
follo	issuer had duly caused this notice to be signed wing signature constitutes an undertaking by the st of its staff, the information furnished by the issuer	issuer to furnish to the U.S. Securities	and Exchange Comm	ission, upon written re-
İssı	er (Print or Type)	Signature /		Date
	Acquisition, LLC	Kobert 1 Kelly		12/ <u>9</u> /2003
	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
Ro	pert J. Kelly	Managing Member		
		ATTENTION		

	E. STATE SIGNATURE		
		Yes	No
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?		_X
	See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Ottering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature 1	Date
BPI Acquisition, LLC	Robert 1 Kelly	12/ 9 /2003
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Robert J. Kelly	Managing Member	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

					APPENDIX				
1	Intend to accr inves State	2 if to sell non- edited stors in (Part B- m 1)	Type of security and aggregate offering price offered in State (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
co									
CT									
DE									
DC									
FL									
GA									
HI									
ID									
IL									
IN	<u> </u>								
IA									
KS									
KY				<u></u>					
LA									
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MT									
NE									
NV									
NH									
NJ									
NM	<u></u>								

					APPENDIX				
1	to non- investo	2 id to sell accredited irs in State B-Item 1)	Type of security and aggregate offering price offered in State (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
NY									
NC									
ND		******							
ОН			Membership Interests \$400,000	5	\$400,000	0	\$0.00		х
ОК									
OR									
PA									
RI									
sc									
SD									
TN									
TX					,				
UT									
VT									
VA									
WA									
WV									
WI									
WY									
PR									